

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> (Fees pursuant to Consolidated Appropriations Act. (H.R. 4818).)		Docket Number (Optional) 037652.00050
Application Number 10/561,380		Filed August 28, 2006
For Configurable Dynamic Input Word Prediction Algorithm		
Art Unit 2131	Examiner B.F. Wright	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$ 65
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-2442</u> . I have enclosed a duplicate copy of this sheet.		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.		
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40,786</u>		
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a).		
Registration number if acting under 37 CFR 1.34(a). _____		
<u>R. Kent Roberts</u> Signature	<u>December 22, 2008</u> Date	
<u>R. Kent Roberts</u> Typed or Printed Name	<u>(716) 856-4000</u> Telephone Number	
NOTE: Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of <u>one</u> forms are submitted.		

I hereby certify that this correspondence is being electronically transmitted to the U.S. Patent and Trademark Office on the date shown below.

R. Kent Roberts  
Name

Date: December 22, 2008

R. Kent Roberts  
Signature